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APPLICANTS

Harry Wineberg, Toronto, CANADA;

** CONTINUING DATA *****
none, lcg

** FOREIGN APPLICATIONS *****
none, lcg

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 ** 05/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Allowance <i>Laura Aquino</i> Examiner's Signature Initials	CANADA	6	20	3

ADDRESS
 26936
 SHOEMAKER AND MATTARE, LTD
 10 POST OFFICE ROAD - SUITE 110
 SILVER SPRING , MD
 20910

TITLE
 Toothbrush

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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